

Air Force Medical Operations Agency

Excellent Healthcare, Clinical Currency

Air Force TMA DQ Course Break-Out Session



AFMOA/SGAR
September 2011



Air Force TMA DQ Course Break-Out Session Overview

- **Organization**
- **MTF Engagement & Available Resources**
- **Why is DQ Important?**
- **HSI Requirements**
- **DQ Assurance Team**
- **CHCS Provider File**
- **Other DQ Efforts**
- **DQ Review List/Statement Completion**



ORGANIZATION

Excellent Healthcare, Clinical Currency



Organization

HAF/SG8Y (Policy)

Chief, Financial
Performance

AF DQ Manager

AFMOA (Execution)

Program Manager

Program Analyst

DQ SME

DQ SME



AFMOA Strategic Alignment



Excellent Healthcare, Clinical Currency

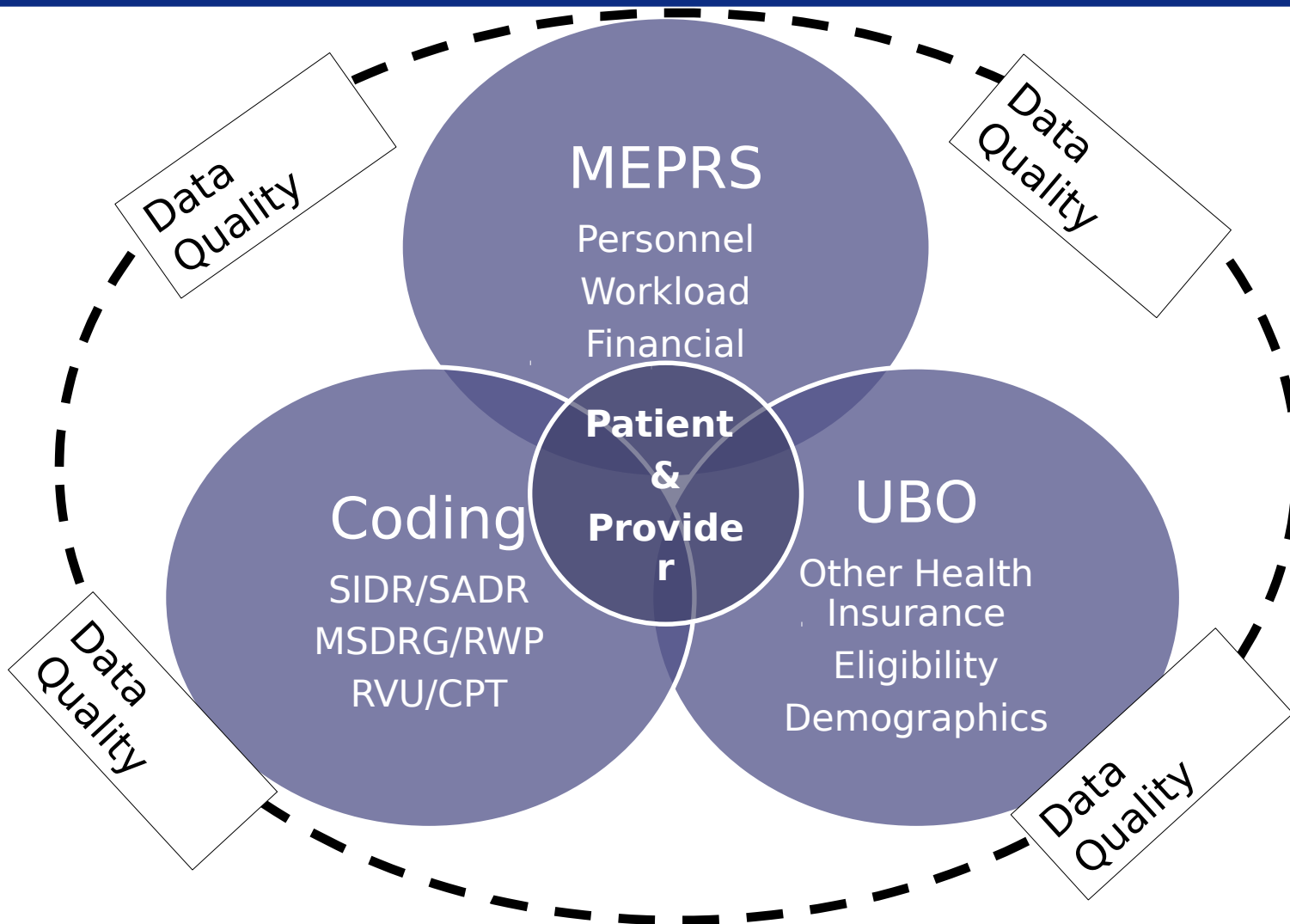


AFMOA/SGAR

Excellent Healthcare, Clinical Currency



Integrated Approach



Excellent Healthcare, Clinical Currency



DQ Roles and Responsibilities

Excellent Healthcare, Clinical Currency



MTF ENGAGEMENT & AVAILABLE RESOURCES

Excellent Healthcare, Clinical Currency



MTF DQ Engagement

Excellent Healthcare, Clinical Currency



Vector Check

Vector Check - *"Think of Vector Check as your DQ Toolkit"*

- Share Point application; primary website for the AFMOA DQ
- Must have a Kx (AFMS Knowledge Exchange) <https://kx.afms.mil> membership before you can access Vector Check
- Once you have obtained a Kx membership, and are still unable to access Vector Check, contact AFMOA POC
 - Include your name, e-mail, and DSN
 - Turnaround time is 24-48 hours
- Visit the AMFOA DQ site at: <https://vc.afms.mil/afmoa/sga/sgar/sgardq/default.aspx>



Air Force Medical Service



Excellent Healthcare, Clinical Currency

SGAR - DQ Home

Documents

Documents

Lists

Contacts

Announcements

FAQs

Discussions

SGAR DQ Discussions

Surveys

Resource Operations

Survey

Vector Check > AFMOA > SGA > SGAR > SGAR - Data Quality

AFMOA/SGAR Resource Operations Branch

Welcome

Welcome to the AFMOA Data Quality web page. Our intent is to provide current information to support the Air Force Medical Service Mission.

The AFMOA Data Quality Program Office supports all Air Force Military Treatment Facilities (MTFs). Our subject matter experts focus on implementing business practices that result in improving data reliability, validity, and timeliness from all levels of the organization. We work with Data Quality Managers in the field to improve uniformity and standardization of clinical and workload reporting. The ultimate goal is improve data quality and business practices in all our Air Force MTFs.

All e-mail correspondence to the AFMOA Data Quality Program office should be sent to the organizational mailbox afmoa.dq@Lackland.af.mil. This will ensure your e-mail is reviewed and responded to in a timely manner.

Announcements

Provider File Updates

by Lisa A Molina

5/24/2011 3:45 PM

New Provider File Report Cards and Provider File Metrics have been posted under Documents>Performance Measures (Metrics)>Provider File Performance

February FY11 DQ Statement metrics

by Jennifer E Gifford

5/13/2011 8:10 AM

The February FY11 DQ Statement metrics have been updated for your review. This includes:

1. Individual base DQ Statement metrics by MAJCOM
2. AF Roll Up
3. DQ Statement Timeliness and Accuracy, Telecon Participation

Events Calendar

6/7/2011 5:00 PM

AF DQ Patient Registration Training (PACAF) Central Standard Time
Change Package 363 - Patient Registration Items

6/8/2011 10:30 AM

AF DQ Patient Registration Training (CONUS) Central Standard Time
Change Package 363 - Patient Registration Items

6/9/2011 8:00 AM

AF DQ Patient Registration Training (USAFE) Central Standard Time
Change Package 363 - Patient Registration Items



Reports

There are currently no favorite links to display. To add a new link, click "Add new link" below.

☐ Add new link

Links

- Defense Connect Online
- TMA Data Quality Management Control
- Biometric Data Quality Assurance Service
- Military Help System Help Desk
- NPPES NPI Registry (NPI research tool)
- HCidea Lookup.org (NPI & DEA research tool)
- HIPAA
- WISDOM
- TMA Training
- MEPRS Information Portal



Vector Check Documents



Vector Check Documents Continued



Vector Check RM Master Roster

- **Vector Check RM Master Roster Updates**
 - **<https://vc.afms.mil/AFMOA/SGA/SGAR/default.aspx>**
- **Update the following positions:**
 - **MDG Commander**
 - **MDG Deputy Commander**
 - **MDSS Commander**
 - **Administrator**
 - **RMO**
 - **RMO NCOIC**
 - **DQ Manager**
 - **DQ Alternate**
- **Recommend that Budget Analyst, MEPRS, and UBO staff update their primary and alternate information**

My DCO

[Home](#)

[My Meetings](#)

[My Account](#)

[Sponsor Account](#)

Web Conferencing

[Create a New Meeting](#)

[My Meetings](#)

[My Recordings](#)

[My Content](#)

[My Templates](#)

[Public Meetings](#)

[Public Recordings](#)

[Active Public Meetings](#)

Instant Messaging

[Open XMPP Web Client](#)

[Download XMPP Desktop Client](#)

Getting Started

[User Manuals](#)

[On-Demand Training](#)

[Live Training](#)

User Resources

[Sponsored Account User Guide](#)

[DOD Enterprise Services Designation](#)

[FAQs](#)

[Self Service Password Reset](#)

[Downloads and Plugins](#)

[Community Forum](#)

[Test Meeting Connectivity](#)

[DoD Certificates Download](#)

New DCO XMPP Desktop Client 5.4 v3 Now Available

The new client is now available for download from the 'Downloads & Plugins' page. This new client fixes several issues in earlier releases and we are highly encouraging that DCO chat service users migrate to this new version.

Issues fixed include:

- 1) Room search causing client disconnects
- 2) Large amounts of data could be pasted into chat & cause client instability
- 3) Inability to use the DCO chat client for other chat services
- 4) Connection timeout settings that caused low bandwidth/high latency users to disconnect

NOTE: Users upgrading from 5.2.x clients to 5.4 v3 client should note that the 'Username' field should be changed to 'chat.dco.dod.mil' at the end of the username (without the '@chat.dco.dod.mil' at the end)



MY DCO

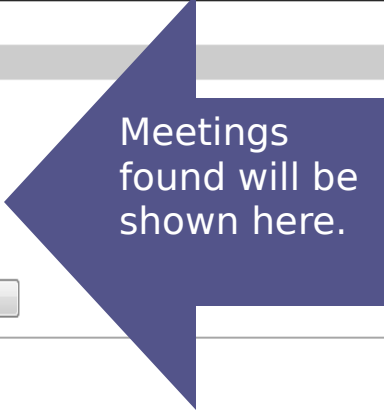
My Meetings

Meeting Name	Meeting Date	Start Time
AFMOA FEB 10 DQ TELECON	2010-02-16	14:00
pt dup	2010-02-02	21:00
tina	2010-02-02	15:00
MUG	2010-02-01	13:15
EDQ	2009-08-19	11:00

[View All My Meetings](#)

My Account

- [View My Profile](#)
- [Change My Password](#)



■ **To become a registered user visit: <https://www.dco.dod.mil>**

DCO Search

Content Search:

[GO](#)

User Search:

First Last [GO](#)

Meeting/Recording Search:

[GO](#)

Special Announcements

12Feb10 - ASI Scheduled for 13-14 FEB 10

DCO has an ASI scheduled this weekend on NIPR and SIPR during the following times:

1 [More](#)

08Feb10 - 144K CAC Cards

The DCO 144K CAC log-in issue has been addressed. All 144K CAC holders should now be able to [More](#)

14Jan10 - LIVE REMOTE DCO TRAINING

DCO will offer two live remote training sessions for the month Jan, Feb, and Mar 2010. < [More](#)

Recent Announcements

15Jul09 - DCO Meeting Room Maintenance

As part of DCO meeting maintenance plan, Host should ensure that Connect Meeting Rooms are [More](#)

16Jun09 - NEW DCO CTO 09-006


A new Communication Task Order has been issued for Defense Connect Online. The CTO can be [More](#)

05Jun09 - DCO Connect 7 upgrade

The Scheduled 8(UE) & 15(CE) March Connect 7 upgrade has been delayed until further notice [More](#)

[View All Announcements](#)

Camera and Voice



Camera and Voice

Icons for chat and settings

Attendee List (1)

My Status


 GIFFORD, JENNIFER E Ms. USAF

Chat

To: Everyone

Note Pod

Share



What do you want to share?

My Computer Screen...

Documents

Whiteboards

Share Full screen

You can chat here. If we are in the middle of training thru DCO we will be unable to respond during that time.



DQ Telecon Attendance

Attend DQ Telecon									
Telecon Month	Apr-10	Jun-10	Aug-10	Oct-10	Dec-10	Feb-11	Apr-11	Jun-11	Aug-11
Air Force	78%	78%	75%	81%	82%	79%	67%	71%	65%
ACC (12)	83%	92%	92%	92%	83%	92%	83%	83%	92%
Beale									
DM									
Dyess									
Ellsworth									
Holloman									
Langley									
Mt Home									
Moody									
Nellis									
Offutt									
Sey-John									
Shaw									
AETC (12)	83%	75%	58%	83%	83%	83%	75%	75%	67%
Altus									
Columbus									
Goodfellow									
Keesler									
Lackland (Wilford Hall)									
Laughlin									
Luke									
Maxwell									
Randolph									
Sheppard									
Tyndall									
Vance									
AFDW (2)	50%	100%	50%	100%	100%	0%	50%	50%	50%
Andrews									
Bolling									

Excellent Healthcare, Clinical Currency



DQ Team Users Guide (TUG)

Excellent Healthcare, Clinical Currency



DQ TUG Format



TO USE LINKS CLICK OPTIONS AND ENABLE CONTENT

SORT BY PRIMARY POC, THEN ACTIVATE HYPERLINKS AT COLUMN B

Section	Table of Content	Brief Description	Facility Type	Primary POC
	Forward	Introduction	All Facilities	DQ Team
A. Organizational Factors	Question A.1.	Data Quality Statement Signed by Commander	All Facilities	DQ Manager
A. Organizational Factors	Question A.2.	Data Quality Statement Submitted to Service DQ Manager	All Facilities	DQ Manager
A. Organizational Factors	Question A.3.	Data Quality Team Met and Completed DQMC Review List	All Facilities	DQ Manager
A. Organizational Factors	Question A.4.	DQ Manager Brief to the MTF Executive Committee	All Facilities	DQ Manager
A. Organizational Factors	Question A.5.a.	Coding Compliance Plan	All Facilities	Coding Staff
A. Organizational Factors	Question A.5.b.	Coding Compliance Plan	All Facilities	Coding Staff
A. Organizational Factors	Question A.6.a.	UBO Compliance Plan	All Facilities	UBO Staff
A. Organizational Factors	Question A.6.b.	UBO Compliance Plan	All Facilities	UBO Staff
A. Organizational Factors	Question A.7.a.	DQM Attend Data Quality Course	All Facilities	DQ Manager
A. Organizational Factors	Question A.7.b.	DQAT Members Attend Data Quality Course	All Facilities	DQ Manager
A. Organizational Factors	Question A.7.c.	DQAT Members Trained	All Facilities	DQ Manager
A. Organizational Factors	Question A.8.	Non-Compliant Comments	All Facilities	DQ Manager
B. Data Input	Question B.1.a.	ADM Written Procedures	All Facilities	Clinic Manager's
B. Data Input	Question B.1.b.	AHLTA Written Procedures	All Facilities	Clinic Manager's
B. Data Input	Question B.1.c.	CCE Written Procedures	All Facilities	Coding staff
B. Data Input	Question B.1.d.	CHCS Written Procedures	All Facilities	Section Manager's
B. Data Input	Question B.1.e.	DMHRIS Written Procedures	All Facilities	MEPRS/DMHRIS Manager
B. Data Input	Question B.1.f.	Essentris Written Procedures	Inpatient Facilities	Inpatient Manager
B. Data Input	Question B.1.g.	MEPRS/EAS Written Procedures	All Facilities	MEPRS/DMHRIS Manager
B. Data Input	Question B.1.h.	TPOCS Written Procedures	All Facilities	UBO Manager



DQ TUG Format

A.6. Does your MTF have a Uniform Business Office (UBO) Compliance Plan?
b.) Reviewed and approved quarterly for compliance?

Performance Threshold:

Yes; If a UBO Compliance Plan has been reviewed quarterly for compliance; GREEN

No; If the UBO Compliance Plan has not been reviewed quarterly for compliance; RED

N/A; not appropriate for this question.

Comments are required on Review List if non-compliant. Review Appendix A for comment requirements.

Details:

The UBO Compliance Plan will be reviewed quarterly for compliance. TRICARE Management Activity (TMA)/UBO has a template that can be tailored to each facility. Follow the instructions below to get the most current template:

1. Go to the TMA, UBO web site at:

http://www.tricare.mil/ocfo/mcfs/ubo/policy_guidance/letters.cfm

2. Scroll down to Compliance.

3. Click on "Compliance Audit Checklist".

Process:

The UBO staff or designated representative will:

1. Ensure there is a current UBO compliance plan which has been reviewed quarterly for compliance.

2. Provide the DQ Manager with the quarterly dates.

The DQ Manager will:

1. Complete this question on a quarterly basis.

2. Populate the date for when the quarterly review was accomplished.

NOTE: If performance measure is RED, the DQ Assurance Team and MTF Executive Committee will need to be briefed and corrective actions accomplished/tracked by locally appointed personnel.

Additional Information:

Review Section A.6.b. (Organizational Factors) in the DQ Management Control Review List for the current fiscal year.



Workload Guidelines Sample

Encounter Activity	Provider Type	Provider Specialty Code	MEPRS Code for Time Capture	MEPRS Code for Workload	Count/Non-Count Indicator	Patient Encounter Business Rules	Coding Required	Billing Required
Nutritionist/Dietitian	Privileged Provider	704 - Dietician/Nutritionist	B***	B***	Count	Registered dietitians or licensed nutrition Professionals are responsible for providing medical nutrition therapy (MNT).	Yes	Yes

- Supplements AF Coding Guidelines
- Published by AF Coding Experts
- MHS Coding Guidelines, inpatient and outpatient, dated 1 January 2011

http://www.tricare.mil/ocfo/bea/ubu/coding_guidelines.cfm



Best Practices

Please submit any potential best practices for possible inclusion

Excellent Healthcare, Clinical Currency



WHY IS DQ IMPORTANT?



Why is Data Quality Important?

**To accurately reflect the
work performed in your**

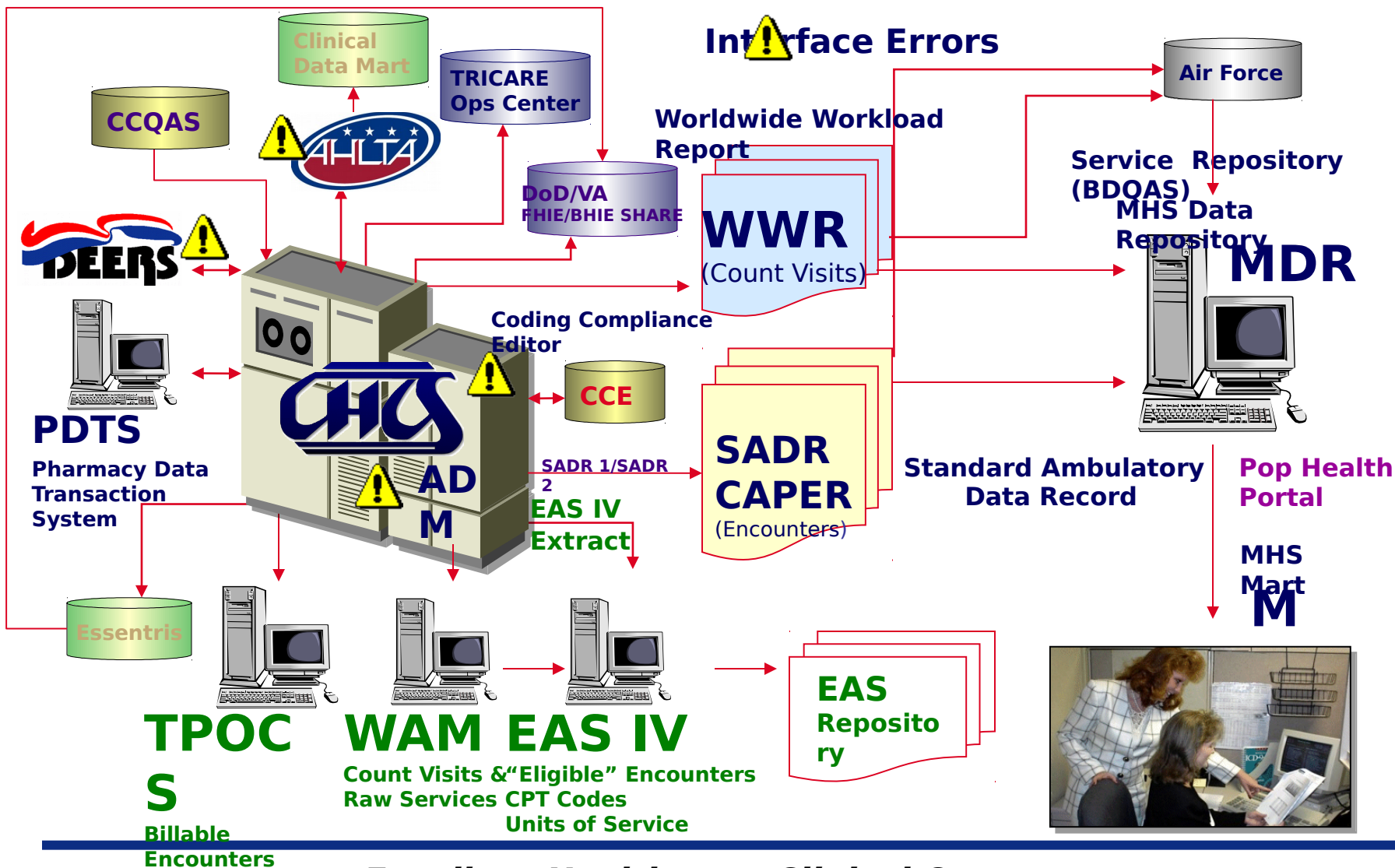
MTE



Excellent Healthcare, Clinical Currency



DQ System Architecture





How is your data used?

Excellent Healthcare, Clinical Currency



Actual Impact

Excellent Healthcare, Clinical Currency



DQ Success Factors



HSI REQUIREMENTS



HSI Requirements

Excellent Healthcare, Clinical Currency



HSI Requirements



DQ ASSURANCE TEAM



DQ Assurance Team

Excellent Healthcare, Clinical Currency



DQ Assurance Team

Excellent Healthcare, Clinical Currency



DQ Assurance Team Initiatives - Interest Items (cont)



CHCS PROVIDER FILE



CHCS Provider File Report Cards



Provider File Report Card

0077 CHCS Provider File Audit Report Card-Range

6/1/2009 To 6/30/2011

341st MED GRP-MALMSTROM

Demographics

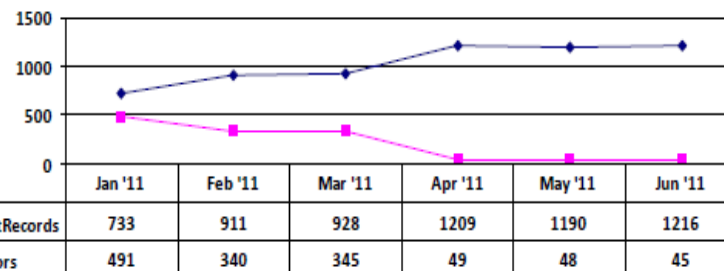
MTF Name:	DMIS:	Platform Host:	Facility Type
341st MED GRP-MALMSTROM	0077	341st MED GRP-MALMSTROM	Large Clinic

Error/Discrepancy Analysis

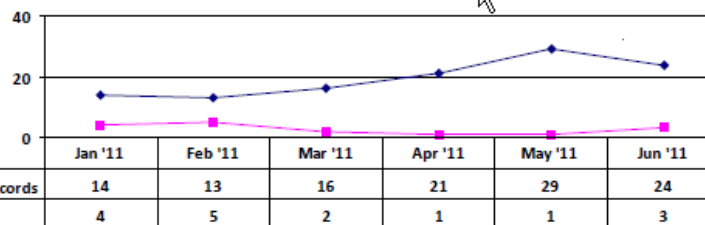
Last Date Data Entered	Number Of Records:	# Of Records W Errors	%With Errors:	Avg # of Errors/Record
30-Jun-2011	1261	45	3.57%	1.2

ERROR/DISCREPANCY	DESCRIPTION	PRIMARY EFFECT	#
Naming Convention	Provider names that may not be in the required format	\$\$, Pt Safety, Data Integrity	1
NPI - Null	Provider records that have a null NPI	\$\$	24
NPI - Duplicate	Two or more providers that contain the same NPI	\$\$	5
Sig Class/PSC Mismatch	Provider signature class with nurse or tech specialty	Pt Safety, Anc Workload	3
Signature Class	Providers that contain a null, (0)clerk, or (1)nurse signature class	Pt Safety, Anc Workload	4
Provider Specialty Code (PSC)	PSC is null, Over 905 or between 500 and 518	\$\$, Workload	0
HIPAA Taxonomy	Taxonomy codes that do not correlate to the PSC	\$\$, Workload	17
Primary Hosp Location	Inside/outside providers with MEPRS mismatch	Data Integrity	0
DEA / License #	Both fields are null for external providers	Pt Safety	0
Generic Provider	Site created provider accounts that are not true providers	\$\$, Pt Safety, Workload	0
Potential Duplicate	Two or more providers in the provider file that appear to be a duplicate provider	\$\$, Pt Safety, Workload	0
Total Errors, Count			54

DMIS Provider Recent Activity Rates by Reporting Month



DMIS Provider New Entry



MTF Ranking by Peer Group

MTF Name	Date Range	# of Records	# Of Records W Errors	# Of Errors	% With Errors:	Avg # of Errors / Record
12 49th MED GRP-HOXTLOMAN	0084	1429	31	32	2.17%	1.0
13 7th MED GRP-DYESS	0112	1606	43	49	2.68%	1.1
14 75th MED GRP-HILL	0119	5082	146	168	2.87%	1.2
15 341st MED GRP-MALMSTROM	0077	1261	45	54	3.57%	1.2
16 92nd MED GRP-FAIRCHILD	0128	3209	122	142	3.80%	1.2



Provider Details Report

-Error	-Naming Conver	-NPI	-SigClassPSCMis	-Sig Class	-Spec Code	-Taxonomy	-Primary Hosp L	-DEAorStLic	-Generic Provide	-Dup NPI	-Potential Dup	RecentOEActivity	NewEntry	RangeEntry	DataDate	IEN	LastOEDate	DateOfEntry
X						X						TRUE	0	0	7/1/2011	111	6/22/2011	12/28/1999
X		X										TRUE	0	0	7/1/2011	1233	6/29/2011	7/16/1996
X										X		TRUE	0	0	7/1/2011	1980	1/27/2011	8/21/1998
X		X				X						TRUE	0	0	7/1/2011	2462	8/3/2010	6/8/2000
X		X				X						TRUE	0	0	7/1/2011	2553	6/30/2009	8/10/2000
X		X				X						TRUE	0	0	7/1/2011	257	8/4/2009	9/28/1994
X		X				X						TRUE	0	0	7/1/2011	2899	12/28/2009	7/19/2001
X		X				X						TRUE	0	0	7/1/2011	2954	3/26/2010	9/14/2001
X		X				X						TRUE	0	0	7/1/2011	3163	6/15/2011	6/26/2002

Name NPI Type NPI # EDIPN PSSN Flag OE Inact Term Location MEPRS DMIS ID Installation

Pro Class Sig Class Sup Prov DEA# Lic# Who 1st Spec 2nd Spec HIPPA TAX DBAInact



Potential Revenue Impact



CHCS Provider File Errors and Error Criteria (example)



CHCS Provider File Errors and Error Criteria (example)



Outside Provider Entry Checklist

<input type="checkbox"/> Provider Name Entered <ul style="list-style-type: none"> Ensure correct naming convention rules were applied Example of correct naming convention: DOE,JOHN K 	<ul style="list-style-type: none"> No spaces between last name & first name No apostrophes No periods after middle name (if any) No professional titles in name (MD, DO) Name must be in all CAPITAL LETTERS Hyphenated last names <i>are</i> acceptable (i.e. STRETCH-MCCLAIN) Enter middle initial (space is used after first name when entering middle initial)
<input type="checkbox"/> Provider Flag Entered	<ul style="list-style-type: none"> Set outside provider flags to PROVIDER
<input type="checkbox"/> Provider Specialty Code (PSC) Entered	<ul style="list-style-type: none"> Do not use PSC of 000 (General Medical Officer) or 001 (Family Practice Physician) as a default PSC Do not use PSCs of 900 or above, these are either technician or clinic PSCs, exception is 901 (Physician Assistant)
<input type="checkbox"/> Provider Class Entered	<ul style="list-style-type: none"> Set provider class to OUTSIDE PROVIDER
<input type="checkbox"/> Location Entered <ul style="list-style-type: none"> Set to location name with FCCA (Support to Non-Federal External Providers) MEPRS code attached 	<ul style="list-style-type: none"> MTFs may have different location names for outside providers (i.e. CHAMPUS SUPPORT, OUTSIDE PROVIDERS, etc) use the location clinic name that is assigned to your facility for outside providers with a FCCA MEPRS code
<input type="checkbox"/> Provider ID Entered	<ul style="list-style-type: none"> Use first four letters of the last name and first four letters of the first name
<input type="checkbox"/> Requiring Supervisor Provider Entered	<ul style="list-style-type: none"> Set Requiring Supervisor Provider Entered field to NO
<input type="checkbox"/> DEA Number Entered	<ul style="list-style-type: none"> CHCS requires that either a DEA # or License # is entered for outside providers Preferred # is DEA#
<input type="checkbox"/> Rank of CIVILIAN Entered	<ul style="list-style-type: none"> After entering a rank of CIVILIAN for outside providers, CHCS will prompt you to pick a specific civilian status XCIV will be the appropriate status for non-service affiliated outside providers
<input type="checkbox"/> License Number Entered	<ul style="list-style-type: none"> CHCS requires that either a DEA # or License # is entered for outside providers
<input type="checkbox"/> Sex Entered	<ul style="list-style-type: none"> Enter appropriate gender
<input type="checkbox"/> National Provider Identifier (NPI) type/ID Entered	<ul style="list-style-type: none"> The NPI type of 1 (individual) provider will auto populate when the NPI number is entered The NPI number may not be included on the outside provider script, you will need to locate NPI on one of the following web sites: https://nppes.cms.hhs.gov/NPPES http://www.geoaccess.com/ncpdp/po/ Subscription is required for the HC Idea website



Provider File Progress Metrics



Provider File Progress Chart Introduction Tab

CHCS Provider File Progress Metrics

BACKGROUND:

This file provides performance metrics which allow monitoring of MTF's progress towards correcting CHCS Provider File errors.

Orange Tabs provide Instructions or Assist with Navigating the Provider File Progress Metrics

1. Introduction (Click here to go to worksheet)

Explains each tab and assists with navigating the Provider File Metrics

2. Peer Groups (Click here to go to worksheet)

Lists the most current Peer Groups (source M2)

3. Filtering Instructions (Click here to go to worksheet)

Provides instructions for filtering pivot tables contained within this spreadsheet.

Green Tabs Show the Provider File Error Rate Either by MAJCOM or for SAV sites

1. MAJCOM Overview (Click here to go to worksheet)

Shows the percentage of errors in the provider file by reporting month for each MAJCOM in the AFMS.

2. Individual MAJCOM Reports

Shows the percentage of errors in the provider file by reporting month for each MAJCOM in the AFMS. (Select the MAJCOM link below to go to worksheet)

ACC

AETC

AFDW

AFGSC

AFMC

AFSOC

AFSPC

AMC

PACAF

USAF

USAF

3. SAV MTF's Progress (Click here to go to worksheet)

Shows the error percentage for just those MTF's where AFMOA/DQ has conducted a site visit or provided extensive support.

Blue Tabs show AFMS Overview of Error Rates

1. AFMS' Top-Bottom Error Rate (Click here to go to worksheet)

Shows the MTFs that have the 10 Highest and 10 lowest Provider File percentage of errors in the AFMS

2. AFMS Error & Correction Rate (Click here to go to worksheet)

Shows the total number of errors across the AFMS. The second chart contrasts error rate and correction rate across AFMS

Grey Tabs Provide Sortable Pivot Tables to View Error Rate or Number of Errors in the Provider File

1. Sortable MTF% of Errors (Click here to go to worksheet)

Shows the percentage of errors in the provider file by reporting month for each MTF in the AFMS. This chart can be further filtered by MAJCOM and Peer Group for trending and comparison purposes. (Note: Filtering instructions can be found on the 3rd Yellow Tab)

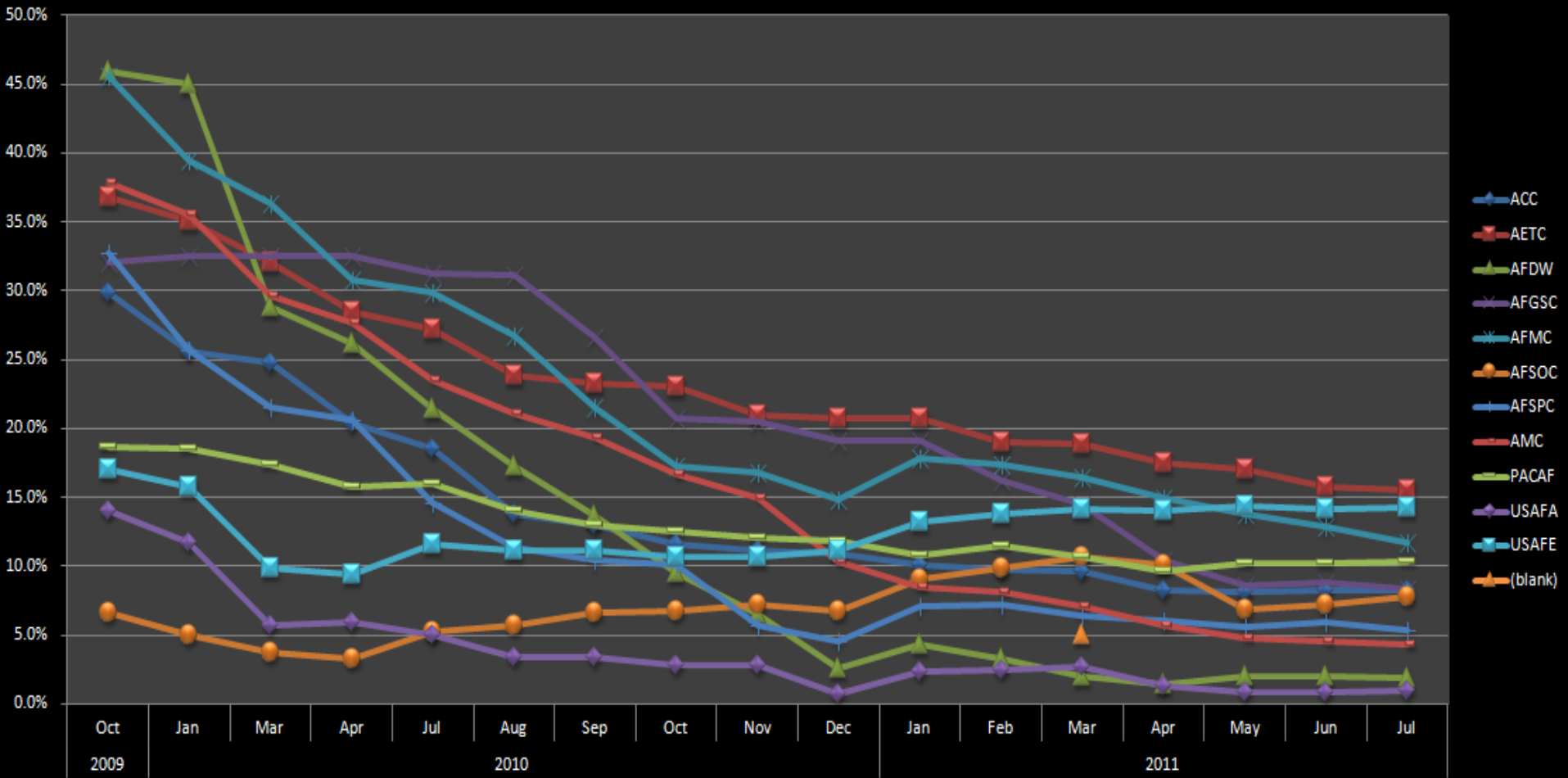
2. Sortable MTF # Errors (Click here to go to worksheet)

Shows the number of errors in the provider file by reporting month for each MTF in the AFMS. This chart can be further filtered by MAJCOM and Peer Group for trending and comparison purposes. (Note: Filtering instructions can be found on the 3rd Yellow Tab)



Provider File Progress Metrics Example

MAJCOM
Provider File Error Rate



Excellent Healthcare, Clinical Currency



OTHER DQ EFFORTS



Patient Registration DQ Team

Excellent Healthcare, Clinical Currency



DQ REVIEW LIST/STATEMENT COMPLETION

Excellent Healthcare, Clinical Currency



DQ Review List/Statement ~~Reminders~~

Excellent Healthcare, Clinical Currency

[illegible]



DQ Review List/Statement Comments

Excellent Healthcare, Clinical Currency



DQ Review List DQ Assurance Team Meeting



DQ Review List DQ Assurance Team Meeting



DQ Review List Executive Committee Brief



DQ Review List Executive Committee Brief



DQ Review List Executive Committee Brief



DQ Review List Executive Committee Brief



DQ Review List Software Version



DQ Review List Rejected Data



EOD AND ADM Compliance Procedures



AHLTA ADM Exceptions Report



DQ Review List/Statement Completeness



DQ Review List/Statement ~~BDQAS~~

Excellent Healthcare, Clinical Currency



What is BDQAS?



BDQAS Contents



BDQAS Benefits

Excellent Healthcare, Clinical Currency

2/26/2010
8:40 A.M.

Program
References

Data
Metrics

Analytics

Select Data Metrics

[Main Menu](#)

Biometric Data Quality Assurance Service

[home](#)

[directory](#)

[product lines](#)

[contact us](#)

Allows greater access empowering key decision makers and delivers policy and guidance information to ensure the quality and timeliness of biometric data.

Announcements

10 Feb 10 - New MAJCOM AFGSC (includes Barksdale, FE Warren, Malmstrom, Minot and Whiteman).

15 Jan 10 - View or download the [latest DoD Extender Codes](#).

11 Nov 09 - Download the latest [AFMS Workload Guidelines Version 2.0](#)

01 Jun 09 - Download the latest [Coding Guidelines](#) (Ambulatory and Inpatient)

07 May 09 - RVUs are updated for CY09. Read more [here](#).

23 Apr 09 - New "delta analysis" added to the monthly completion reports (drillable). This categorizes the discrepancy between DOWR and SADR. Only available for FY08 and FY09, at base level and lower. You can also click on the delta to request a detailed report for identifying the missing records. Feedback encouraged!

Related PHSD
links:



PHSD Knowledge
Exchange



Population Health
Portal

Ambulatory Metrics

Outpatient Clinics:

[ADM Timeliness Metric: Graphics](#) [Text](#)
[MTF rankings: Completeness](#) [Timeliness](#)
[Most improved MTFs](#)
[Monthly timeliness reports \(new\)](#)
[Monthly completion reports](#)

APV/OBSV Clinics:

[ADM Timeliness Metric: Graphics](#) [Text](#)
[MTF rankings: Completeness](#)
[Monthly timeliness reports](#)
[Monthly completion reports](#)

[Monthly completion reports \(drillable\)](#)

[Completeness rankings: FY07 FY08 FY09 FY10](#)

[Transmission Reports](#)

Inpatient Metrics

[Coding Completion Rate](#)
[SIDR-WWR Comparison](#)
[FY Comparison Reports](#)
[Top DRG - Bedded facilities](#) [Non-bedded](#)
[Top DX - Bedded facilities](#) [Non-bedded](#)
[Top OP - Bedded facilities](#) [Non-bedded](#)
[Transmission Reports](#)
[Information](#)

Clinical Coding Reports

[Primary ICD-9 Analysis](#)
[All ICD-9 Analysis](#)
[E&M Analysis](#) [by Provider Specialty](#)
[Primary CPT Analysis](#)
[All CPTs Analysis](#)
[Coding RVU Reports](#)
[6-month historical](#)
[RVU by FY](#)

Data Quality Reports

[Data Quality Statement Reports](#)
[ADM/AHLTA Usage](#)
[P2R2 Look-ahead Reports](#)
[Coding Audits File Receipt](#)

WWR Metrics

[6-Month Completeness](#)
[Information](#)

Online Help Documents

[CHCS Ad Hoc Samples](#)

Questions/comments can be directed to the bdqas@brooks.af.mil

AF/SG Data Quality Metrics

Updates/News

- Feb 10 - New MAJCOM AFGSC (includes Barksdale, FE Warren, Malmstrom, Minot and Whiteman).
- Dec 10 - Changes to DQ statements. Question 1b is now 1a, the old question 1a has been dropped. Question 8a has been modified. The SADR number now includes only count visits, so the percentage should now be close to 100. All percentages are now reported with two decimals of accuracy. If you have any questions or concerns, please contact us at bdqas@brooks.af.mil.
- Oct 01 - DMIS 1350 has been merged back into DMIS 0117.
- Jul 21 - Updated peer group definitions. Read more [here](#).
- May 07 - We are now using CY09 RVU values for the RVU reports. Read more [here](#).
- Apr 23 - New "delta analysis" added to the monthly completion reports (drillable). This categorizes the discrepancy between DOWR and SADR. Only available for FY08 and FY09, at base level and lower. You can also click on the delta to request a detailed report for identifying the missing records. Feedback encouraged!

Quick overviews

- [Ambulatory Metrics](#)
- [Inpatient Metrics](#)



Select Data Quality
Statement Reports

DQ Reports by MAJCOM

MAJCOM	Sites	Target Month						
		Jul	Aug	Sep	Oct	Nov	Dec	
ACC	12	Jul	Aug	Sep	Oct	Nov	Dec	
AETC	13	Jul	Aug	Sep	Oct	Nov	Dec	
AFDW	2	Jul	Aug	Sep	Oct	Nov	Dec	
AFGSC	5	Jul	Aug	Sep	Oct	Nov	Dec	
AFMC	8	Jul	Aug	Sep	Oct	Nov	Dec	
AFSOC	2	Jul	Aug	Sep	Oct	Nov	Dec	
AFSPC	5	Jul	Aug	Sep	Oct	Nov	Dec	
AMC	11	Jul	Aug	Sep	Oct	Nov	Dec	
PACAF	9	Jul	Aug	Sep	Oct	Nov	Dec	
USAF	1	Jul	Aug	Sep	Oct	Nov	Dec	
USAFE	10	Jul	Aug	Sep	Oct	Nov	Dec	

Data Quality Statement Reports

These reports provide a quick profile of ambulatory and in-patient coding at the MTF level. Numbers from WWR and EAS IV are compared to the number of raw records received from CHCS.

Select the
command for
your MTF

Each month of the month we will post our SADR, SIDR and WWR numbers. When we receive the MEQS data from the MEPRS we will post all the reports to include the EAS IV numbers.

The report will list the results to the associated questions displayed on the Monthly DQ Commander's Statement. To attain more information on the methodology used, select "more" for each question.

1a - Percent of clinics compliant with "End of Day" processing requirements ([more](#))

1b - Percent of appointments meeting "End of Day" processing requirements ([more](#))

2a - Percent of non-APV encounters coded within three business days ([more](#))

2b - Percent of APV encounters coded within 15 calendar days ([more](#))

4b - Timely transmission of SIDR ([more](#))

4c - Timely transmission of WWR ([more](#))

4d - Timely transmission of SADR ([more](#))

8a - SADR / WWR visits ([more](#))

8b - SIDR / WWR dispositions ([more](#))

8c - EAS IV / WWR visits ([more](#))

8d - EAS IV / WWR dispositions ([more](#))

9 - AHLTA / SADR visits ([more](#))

New Sep 21, 2007 - You can now view SADR file transmissions for the past 90 days to see if any files were late. Link is available on the "4d" page.

Data Metrics Menu						
DQ Reports for AETC						
back to Air Force						
Location	Data Month					
AETC	Jul	Aug	Sep	Oct	Nov	Dec
Altus	Jul	Aug	Sep	Oct	Nov	Dec
Columbus	Jul	Aug	Sep	Oct	Nov	Dec
Goodfellow	Jul	Aug	Sep	Oct	Nov	Dec
Keesler	Jul	Aug	Sep	Oct	Nov	Dec
Lackland	Jul	Aug	Sep	Oct	Nov	Dec
Laughlin	Jul	Aug	Sep	Oct	Nov	Dec
Luke	Jul	Aug	Sep	Oct	Nov	Dec
Maxwell	Jul	Aug	Sep	Oct	Nov	Dec
Randolph	Jul	Aug	Sep	Oct	Nov	Dec
Sheppard	Jul	Aug	Sep	Oct	Nov	Dec
Tyndall	Jul	Aug	Sep	Oct	Nov	Dec
Vance	Jul	Aug	Sep	Oct	Nov	Dec

Select your
MTF and
then the
data month

These are the
questions
and
percentages
for each

question.
BD OAS pulls

Note: Manual
procedures in
DQ TUG if
needed

DQMC Review List / Statement Report - ALTUS AFB : Dec 2010

Database update - 02/10 12:09

EAS IV update - 02/16 16:24

DQMC Review List / Statement Questions	Statistics
	Compl (2020) Total (2020) 100.0%
B.5.a - EOD compliant appointments click for details	
B.6.a - Non-APV encounters coded within 3 business days	*wSAD (4648) *wDOW (4693) 99.0%
B.6.b - APV encounters coded within 15 days	n/a
C.3.b - Timely Transmission of SIDR	n/a
C.3.c - Timely Transmission of WWR	yes
C.3.d - Timely Transmission of SADR	100.0% (31 / 31)
C.3.e - Timely Transmission of DOWDR	100.0%
C.6.b - E&M Coding Accuracy (outpatient)	Correct () Total ()
C.6.c - ICD-9 Coding Accuracy (outpatient)	Correct () Total ()
C.6.d - CPT Coding Accuracy (outpatient)	Correct () Total ()
C.7.b - ICD-9 Coding Accuracy (APV)	Correct () Total ()
C.7.c - CPT Coding Accuracy (APV)	Correct () Total ()
C.9.a - SADR / WWR visits	SADR (1626) WWR (1626) 100.0%
C.9.b - SIDR / WWR dispositions	SIDR (0) WWR (0) n/a
C.9.c - EAS IV / WWR visits	EAS IV () WWR (1626) 0.0%
C.9.d - EAS IV / WWR dispositions	EAS IV () WWR (0) n/a
E.4.i - AHLTA / SADR visits	AHLTA (1626) SADR (1626) 100.0%



DQ Review List ADM SADR/CAPER Errors



DQ Review List ADM SADR/CAPER Errors



DQ Review List ADM SADR/CAPER Errors



DQ Review List/Statement Timeliness



DQ Review List CCE



DQ Review List/Statement Validation and ~~Reconciliation~~



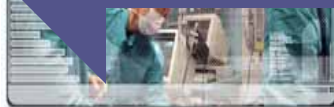
DQ Review List/Statement ~~MEWACS~~

Excellent Healthcare, Clinical Currency

Welcome to the MEPRS Information Portal

The MEPRS Information Portal is your gateway to MEPRS-related resources, including policy documents, learning materials, data quality surveillance tools, and much more.

Click on MEWACS
and then MEWACS
Online



The Medical Expense & Performance Reporting System (MEPRS) is the standard cost accounting system for the Military Health System (MHS), containing Tri-Service financial, personnel, and workload data from reporting medical and dental treatment facilities worldwide.

MEPRS assumes an essential role in MHS decision-making and performance evaluation by offering:

- Uniform performance indicators
- Expense data classified by work center
- Human resource utilization data classified by work center
- A standard methodology for cost assignment

TRICARE MANAGEMENT ACTIVITY:



Management Control and Financial
Studies
Skyline 5-Suite 407
5111 Leesburg Pike
Falls Church, VA 22041

MEPRS Home
» MyMEPRS
» Learning Resources
» MEWACS
MEWACS Online
MEWACS User's Guide
Download MEWACS-Excel
Executive Summary
Executive Summary Archives
» MEPRS Management Improvement Group (MMIG)
» Request EAS IV Repository Access
» Functional User Guides
» Quick Links
» 2010 MEPRS Conference
» 2008 MEPRS Conference
» 2007 MEPRS Conference
» 2005 MEPRS Conference
EAS IV Functional Data Dictionary
Six Sigma MEPRS Management Metrics (S2M3)
MEPRS Newsletter
MEPRS Minute
MEPRS Manual (DoD 6010.13-M) (PDF)

MEWACS Online

Welcome to the MEPRS Early Warning and Control System (MEWACS).

MEWACS is an interactive data quality feedback tool developed by the MEPRS Management Improvement Group (MMIG) to proactively identify, investigate, and resolve MEPRS data anomalies in a timely, systematic manner.

Updated monthly, MEWACS contains numerous Tri-Service MTF activity level metrics, including:

- EAS IV Repository data load status and compliance with 45-day reporting suspense
- MTF-specific summary data outliers
- Interactive MTF MEPRS Data Profiles by 3rd level Functional Cost Code
- WWR vs. EAS IV Repository total ambulatory visit comparison
- Ancillary and Support expense allocation tests

As feedback is received on the usefulness of the data, it may be modified or deleted. Click the Contact Us button in the navigation bar to submit MEWACS questions or suggestions.

Click on Click
here to launch
MEWACS
Online!

»»» Click here to launch MEWACS Online! «««

Data extracted August 16, 2010



Welcome to MEWACS Online!

- Select a metric, enter your search parameters, and click Submit.
- To view another metric, select a different indicator from the menu. Complete any additional search fields that appear, and click Submit.

METRIC

Select a metric: ▼

Select a metric:

Data Load Status
Summary Outliers
MTF Data Profiles
WWR/EAS IV Outliers
Allocation Test
Allocation Detail
Cost per Visit
Cost per Disposition
Personnel Profiles
Workload-Expense Check
MTF Names
FCC List

Select Data Load Status, then
Summary Outliers, then
WWR/EAS IV Outliers, and
then Allocation Test

Data extracted August 16, 2010

METRIC

Data Load Status

Parameters Description

Fiscal Year:	Service:
2010	Army
2009	Navy
2008	Air Force

View Load Dates:

Most Recent Transmission Dates

Show:

All MTFs

Region/MAJCOM:

Select All

AIR COMBAT COMMAND

AIR EDUCATION & TRAINING COMMAND

AIR FORCE DISTRICT WASHINGTON

Parent DMIS ID:

Select All

0066 - 779th MED GRP-ANDREWS

0413 - 579TH MED GROUP-BOLLING

Export to Excel

SUBMIT

Data Load Status

Data Load Status

Percent of 2010 MEPRS Data Reported(Completion):	33.3%
Current Fiscal Month Compliance with 45-day Reporting Requirement(Compliance):	0.0%
YTD Compliance with 45-day Reporting Requirement:	0.0%
Percent of MTFs with 3 or more late MEPRS data submissions:	10.0%

ID	Name	Service	01	02	03	04	05	06	07	08	09	10
0066	779th MED GRP-ANDREWS	F	07/09/2010	07/09/2010	07/09/2010							



Search Criteria Used:

Fiscal Year 2010

Service F

Region AFDW

Parent DMISID 0066

MTFFlags All MTFs

Load Date R

Data extracted August 16, 2010

METRIC

Summary Outliers

Summary Outliers

Available FTEs and Total Visits appear to be driven by the number of days in the month and are therefore not considered an outlier.

Parameters Description

Fiscal Year:

2010
2009
2008

Service:


Army
Navy
Air Force

Region/MAJCOM:

Select All
AIR COMBAT COMMAND
AIR EDUCATION & TRAINING COMMAND
AIR FORCE DISTRICT WASHINGTON

Parent DMIS ID:

Select All
0066 - 779th MED GRP-ANDREWS
0413 - 579TH MED GROUP-BOLLING

 Export to Excel

SUBMIT »

Summary Outliers

DMIS ID	DMIS Name	Service	Dispositions	Total Visits	Personnel Direct...	Total Expenses	Assigned FTEs	Available FTEs	Occupied Bed D...	Dental Weights...
0066	779th MED GRP-ANDREWS	F	01							02
Grand Total										
		1		0	0	0	0	0	0	1



Search Criteria Used:

Fiscal Year
Service
Region
Parent DMISID

2010
F
AFDW
0066

Data extracted August 16, 2010

METRIC

WWR/EAS IV Outliers

Parameters

Description

Fiscal Year:

2010

2009

2008

Service:

Army

Navy

Air Force

Region/MAJCOM:

AIR MOBILITY COMMAND

PACIFIC AIR FORCES

UNITED STATES AIR FORCES EUROPE

US AIR FORCE ACADEMY

Parent DMIS ID:

Select All

0006 - 3rd MED GRP-ELMENDORF

0203 - 354th MED GRP-EIELSON

0287 - 15th MED GRP-HICKAM

Child DMIS ID:

Select All

0203 - 354th MED GRP-EIELSON

1793 - 354 MEDICAL GP/SGD - EIELSON

Export to Excel

SUBMIT



WWR/EAS IV Outliers

WWR/EAS IV

WWR Available Date in the MZ is 7/19/2010. Update expected on 8/17/2010.

0203 - 354th MED GRP-EIELSON

FM	WWR Total Visits	EAS IV Total Visits	Difference
02	2,320	2,123	- 8.5%
Total:	2,320	2,123	- 8.5%



Search Criteria Used:

Fiscal Year 2010

Service F

Region PACAF

Parent DMISID 0203

Child DMISID 0203

Data extracted August 16, 2010

METRIC

Allocation Test

Parameters Description

Fiscal Year: 2010
 Service: Air Force

Show: All MTFs

Region/MAJCOM:
 AIR MOBILITY COMMAND
 PACIFIC AIR FORCES
 UNITED STATES AIR FORCES EUROPE
 US AIR FORCE ACADEMY

Parent DMIS ID:
 Select All
 0006 - 3rd MED GRP-ELMENDORF
 0203 - 354th MED GRP-EIELSON
 0287 - 15th MED GRP-HICKAM

Child DMIS ID:
 Select All
 0203 - 354th MED GRP-EIELSON
 1793 - 354 MEDICAL GP/SGD - EIELSON

FCC: Both

Export to Excel

SUBMIT

Allocation Test

Allocation Test

Cumulative Statistics for 2010

Total expenses unallocated:	\$- 4,643
Percent of MTFs with expenses unallocated:	100.0%

ID	Name	01	02	03	04	05	06	07	08	09	10	YTD Total
0203	354th MED GRP-EIELSON	\$- 4,643										\$- 4,643

Search Criteria Used:

Fiscal Year: 2010
 Service: F
 Region: PACAF
 Parent DMISID: 0203
 Child DMISID: 0203
 FCC CODE: Both
 MTFFlags: All MTFs



AFMOA MEPRS Dashboard



NELLIS AFB

Select Your Facility

Validate

! for all items in red. See Feedback Tab

Legend

Variance greater than one standard deviation

Notes:

*An increase in the Non Available time for December does not require justification

* Total Expense for the month of October does not require justification. This will be corrected when the new utility is deployed.

Excellent Healthcare, Clinical Currency



AFMOA MEPRS Dashboard

Nellis AFB, Apr 2010

MEPRS DASHBOARD REPORT

NELLIS AFB

Data updated from EAS IV on April 21, 2010

MAJCOM (All)
 Facility Code (All)
 Installation Name NELLIS AFB

Select Your Facility

Feedback is required for all items in red. See Feedback Tab

		Column Label	2009	2010												
		Values	OCT	JAN	FEB	MAY	JUN	JUL	AUG	SEP	OCT					
Workload	Total Visits	Corrected	19,518	20,689	Corrected	22,264	20,659	21,355	21,012	21,687	21,142	21,967				
	Assigned Outpatient FTEs		303	322		317	317	315	331	344	348	347				
	Available Outpatient FTE		315	329		337	335	336	338	325	324	351				
	TOTAL OUTPATIENT EXPENSE		\$8,621,027	\$6,241,975		\$5,481,655	\$8,745,491			\$7,510,345	\$6,772,486					
	Cost Per Visit		\$414	\$352		\$329				\$355	\$308					
	Dispositions		248	234		235				293	261	237				
FTEs	Assigned Inpatient FTEs		75	74		75				72	75	78				
	Available Inpatient FTEs		69	69		72				73	80	80				
	TOTAL INPATIENT EXPENSE		\$2,123,968	\$1,937,845		\$2,070,888	\$1,938,213	\$1,711,232	\$2,169,820	\$2,270,738	\$2,244,492	\$2,313,281	\$2,211,380	\$2,146,748	\$2,238,115	\$2,134,908
	Cost Per Disposition		\$8,564	\$8,291		\$8,248	\$5,821	\$7,185	\$7,968	\$9,014	\$8,291	\$7,652	\$7,327	\$8,575	\$9,008	
	Assigned FTEs		899			934	987	978	983	973	966	991	1,004	990		
	Available FTEs		1,111			1,163	1,193	1,188	1,181	1,179	1,189	1,122	1,087	1,205		
Expenses	Non Available FTEs		162	162		146	140	135	150	148	147	180	111	128	104	
	Percent FTEs Reported		141.6%	137.9%		137.7%	135.8%	139.5%	134.5%	136.8%	135.2%	136.2%	141.6%	124.5%	121.0%	132.3%
	Total FTEs Reported		1,273	1,237		1,251	1,305	1,303	1,327	1,338	1,329	1,326	1,368	1,233	1,215	1,310
	Assigned Contractor FTEs		0	0		0	0	0	0	0	0	0	0	0	0	0
	Available Contractor FTEs					248	261	258	261		263	303	275	228	288	
	Available Volunteer FTEs	Corrected				11.22	11.61	9.79	11.81		9.74	7.98	8.69		8.74	
	Assigned Local National FTEs															
	Available Local National FTEs															
	Total Expense		\$15,202,633	\$11,879,547		\$12,418,017		\$14,322,718	\$13,314,380	\$13,423,168	\$13,990,222	\$12,852,213	\$13,647,197	\$12,461,521		
	Depreciation		\$184,704	\$184,704		\$184,704		\$184,704	\$184,704	\$184,704	\$184,704	\$184,704	\$184,704	\$184,704	\$135,460	
	Unallocated Expense		\$0	\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	
	Adjusted Expense		\$14,724,115	\$11,489,775		\$11,999,042		\$13,881,638	\$12,870,099	\$12,981,019	\$13,600,424	\$12,354,450	\$13,199,022	\$12,142,946		
	Free Receipts (Reported)		\$293,814	\$205,068		\$241,229	\$250,815	\$222,743	\$282,989	\$256,376	\$259,577	\$257,445	\$205,094	\$313,059	\$263,471	\$183,115
	Free Receipts Variance		\$71,774	\$31,802		\$60,374	\$61,772	\$61,751	\$57,182	\$47,041	\$65,496	\$61,691	\$0	\$126,754	\$64,430	-\$1
	Transmission Days		-5	1		-9	-4	-1	-2	8	15	0	164	140	117	107

Legend

Variance greater than two standard deviations
Variance greater than one standard deviation

Notes:

*An increase in the Non Available time for December does not require justification



DQ Review List/Statement Validation and ~~Reconciliation~~



DQ Review List/Statement Validation and ~~Reconciliation~~



DQ Review List/Statement Timecards

C.1.e. (DQ Statement question 3.c.) For DMHRSi, what is the percentage of submitted timecards by the suspense date? Source is MEPRS Manager?

C.1.f. (DQ Statement question 3.d.) For DMHRSi, what is the percentage of approved timecards by the suspense date? Source is MEPRS Manager

Remember, comments are required if under 100%

Number of Timecards Submitted On-time

215

320

Number of Timecards Approved On-time

210

320

Total Number of Timecards for an MTF

- Denominators (bottom numbers) should be the same
- Remove the following statuses
 - NULL
 - NOT SUBMITTED
 - REJECTED
 - WORKING
- Remove all personnel who did not work during pay period

Total Number of Timecards for an MTF

- Cannot be greater than C.1.e.
- Remove the following statuses
 - NULL
 - NOT SUBMITTED
 - REJECTED
 - WORKING
 - SUBMITTED
- Remove all personnel who did not work during pay period



DQ Review List/Statement Timecards

January 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

February 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		



Timecard compliance and
EAS transmission



DQ Statements due to AFMOA



Pay period ends



Member PCS'd



Timeliness Timecard
submission



Timeliness Timecard
approval



Rejected timecards
corrected

Excellent Healthcare, Clinical Currency



DQ Review List/Statement Timecards

February 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28					

March 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16 DUE DATE	17	18	19
20	21	22	23	24	25	26
27	28	29	30 DUE DATE	31		

April 2011

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
					1	2
3	4	5	6	7	8	9
10	11	12	13 DUE DATE	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30



Timecard compliance and
EAS transmission



Pay period ends



Timeliness Timecard
submission



Timeliness Timecard
approval



Rejected timecards



corrected

DQ Statements due to AFMOA

Excellent Healthcare, Clinical Currency



DQ Review List/Statement CHCS Duplicate Patients



DQ Review List/Statement CHCS Duplicate Patients

■ Potential Duplicate Report

- Run the Registration report
- Run for the entire data month
- Run this report no earlier than the first day after the data month
- Identify, Exclude, and/or Merge potential duplicates
- Provide DQ Manager the potential duplicate number(s) by unresolved, identified, excluded, and merged

■ Run Time Statistical Report

- Use this report as summary documentation
- Provides results of the Potential Duplicate Report
- Run this report for the first day after the data month to present
- This report captures WHEN the potential duplicate report was ran and the results
- The numbers in the unresolved, identified, excluded, and merged columns are all to be reported on the DQMC Review List & Statement



Patient Duplicate Reporting

- **DISCLAIMER:** We know this is not catching all duplicate patients. Do not use this to gauge the health of your patient file on your CHCS platform. Would recommend on occasion running the “ALL” report and Registration report. However, for DQ reporting purposes, the Registration report number is what should be on the Statement.
- **Just because DQ is asking for the Potential Duplicate Patient Report, does not exclude a facility from running the required monthly PIT Error Discrepancy Report and working them separately. Two different requirements and two different problems.**
 - **Might see some crossover that the same patient’s are on both reports, but this is normal**



DQ Review List/Statement Compliance



DQ Review List/Statement Compliance



DQ Review List ADM SADR/CAPER Errors



DQ Review List/Statement Coding Accuracy Calculation

**The Service
Headquarters will
determine the specific
random sample to be
audited.**

***Note: The
denominator for all
categories should
include codes
identified by the
auditor.**

Excellent Healthcare, Clinical Currency



DQ Review List/Statement Availability



DQ Review List/Statement Accuracy



2569 DQ Review List/Statement Questions

C.8.c. What percentage of completed and current (signed within the past 12 months) DD Form 2569s (TPC Insurance Info) is available for audit (non-active duty encounters only)?

Number of complete and Current DD Form 2569s Available

95
100

Number of Non-Active Duty Non-APV Records Available from Audit

- **Searching for a patients 2569 information in Mini Registration is incorrect and should not be used to conduct the audit**

C.8.d. What percentage of available, current and complete DD Form 2569s is verified to be correct in the Patient Insurance Information (PII) module in CHCS?

Number of DD Form 2569s Correct in PII Module in CHCS

93
95

Number of Available, Current and Complete Non Active Duty DD Form 2569s available from the Outpatient - Non APV 2569 Audit

- **The numerator in C.8.c. becomes your denominator in question C.8.d.**



DQ Review List/Statement Workload



DQ Review List/Statement Workload



DQ Review List/Statement Workload



DQ Review List/Statement AHLTA Use



DQ Review List Contingency Plans

	Business Operations	System Operations
ADM	N/A	
AHLTA	N/A only if not a Host Site	
CCE	N/A	N/A; Not appropriate
CHCS	N/A only if not a Host Site	
DMHRSi	N/A; Not appropriate	N/A
Essentris	N/A if outpatient or Essentris is not deployed	
MEPRS	N/A; Not appropriate	N/A
TPOCS	NA; If OCONUS w/ exception of Hickam, Eielson and Elmendorf	N/A



DQ Review List Incident Tickets



DQ Review List/Statement Referred to Network



DQ Review List Incident Tickets



DQ Statement Awareness

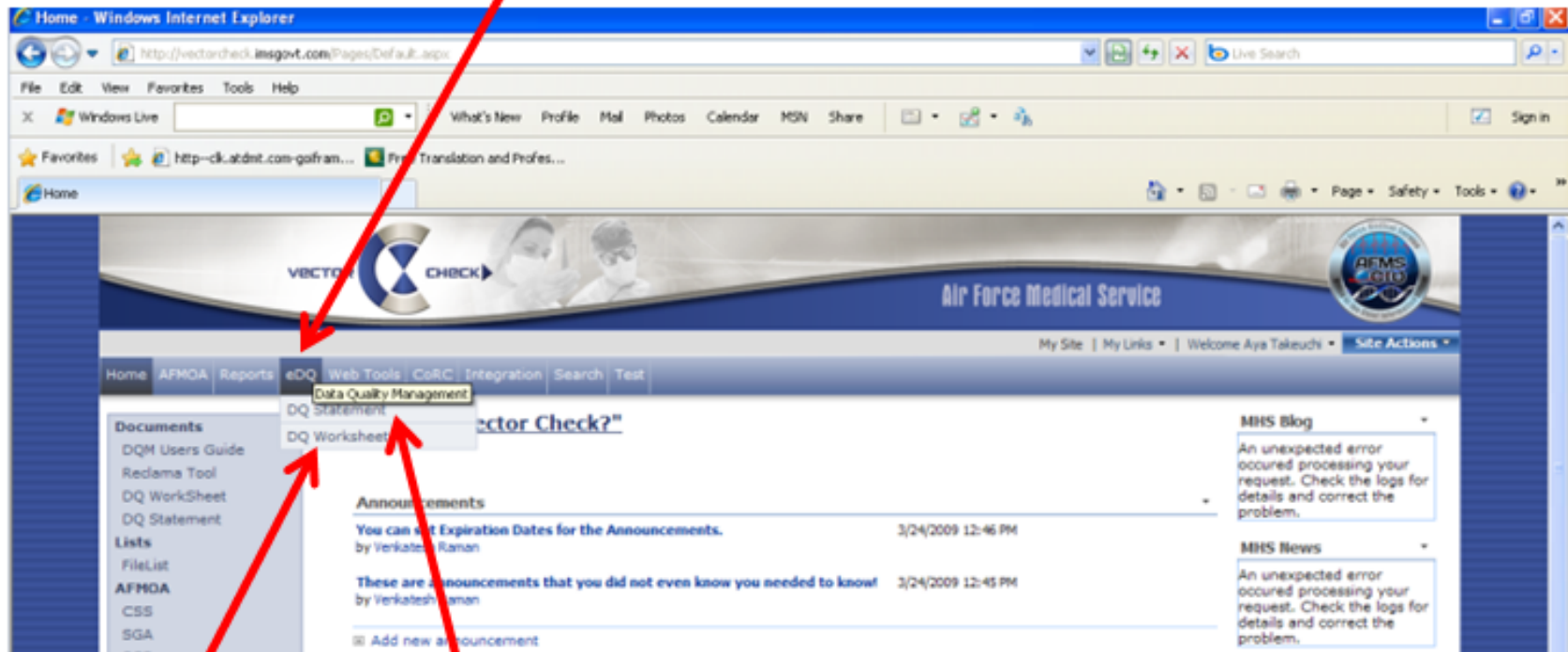


Electronic DQ (eDQ) Review List and Statement



eDQ Access via Vector Check

This menu appears only if the user is granted with access to eDQ



This submenu is visible only to DQ Commander or AFMOA staff

This submenu is visible only to DQ Manager in the MTF



eDQ Review List Main Page

VECTOR CHECK Air Force Medical Service

Home AFMOA Reports eDQ Web Tools CoRC Integration Search Test All Sites Advanced Se

Documents
Lists
Discussions
Sites
People and Groups

View ViewHeader Print View Powered by:

FY 2009 DATA QUALITY MANAGEMENT CONTROL REVIEW LIST

*Instructions: The MTF DQ Manager and members of the DQ Assurance Team (or other designated structures) will forward the completed DQMC Review List to the MTF Executive Committee and Commander for review, coordination and action to meet timelines for completing the Commander's Data Quality (DQ) Statement. Fill in the form with a Yes/No answer, count/percentage, date or other entry as indicated. The completed list provides information for the completion of the monthly Commander's Data Quality Statement. **Bolded items contain data required for the Commander to complete the Data Quality Statement. Please explain negative responses with proposed corrective actions in the comment sections.** The Review list is an internal tool to assist in identifying and correcting financial and clinical workload data problems. All items on this checklist will be completed on a monthly basis (data month - 2 months prior) unless otherwise specified or the question does not apply to the MTF in which case the answer is Not Applicable (N/A). For tracking purposes, the completed forms and accompanying working papers or audit support documents (summary level only and supports answers to the Review List) must be kept on file for five years or as otherwise noted in supporting guidance for the statements in Sections A-E below:*

Worksheet Month:	8/1/2009
DMIS:	0009
Next	

Based on the User Profile,
the DMIS will be displayed.



eDQ Review List Sample View

The screenshot displays the eDQ Review List interface. The header includes the Air Force Medical Service logo and navigation links. The main content area shows a form with sections A through J. Section A, 'Organizational Factors', contains pre-populated data from BDQAS. Section J, 'User-entered data', contains user-entered data. Red arrows point to the pre-populated data and the user-entered data.

Section	Question	Answer	Date
A. Organizational Factors	A.1. The MTF Commander signed last month's Data Quality Statement acknowledging responsibility for the quality of data reported from the MTF.		1/28/2009
	A.2. The MTF DQ Manager submitted the completed Commander's Data Quality Statement to the Service's respective DQ Manager(s).		1/28/2009
	A.3. The Data Quality Assurance Team or other designated structure met during the reporting month to complete the DQMC Review List. (Recommend attaching meeting minutes.)		3/2/2009
	A.4. The DQ Manager briefed the reporting month's DQMC Review List, and Financial and Workload Data Reconciliation and Validation results to the MTF Executive Committee.		3/18/2009
J. User-entered data	J.1. Does your MTF have a Coding Compliance Plan which has been reviewed annually for updates and quarterly for compliance?	Yes	3/10/2009
	J.2. Does your MTF have a URS Compliance Plan which has been reviewed annually for updates and quarterly for compliance?	Yes	3/13/2009
	J.3. Has your Data Quality Manager/Assurance Team members attended?	Yes	
	J.4. Was there evidence in meeting minutes or other sources of corrective plans, of appropriate retraining and actions to follow up on the previous month's negative findings?	Yes	

Pre-populated data
from BDQAS

User-entered data



eDQ Rejection Sample

The screenshot shows the eDQ system interface. At the top, there's a header with the "VECTOR CHECK" logo and "Air Force Medical Service". Below the header is a navigation bar with links like Home, AFMOA, Reports, eDQ, Web Tools, Calc, Integration, Search, and Test. A sidebar on the left contains links for Documents, Lists, Discussions, Sites, and People and Groups. The main content area displays the "FY 2009 DATA QUALITY MANAGEMENT CONTROL REVIEW LIST". It includes instructions for the review process and a form for entering data. The form has fields for "Worksheet Month" (8/1/2009) and "DMIS" (0009). A red arrow points to a rejection message at the bottom of the form: "Worksheet Rejected By Commander: Declined - Please change the column value for AS." The interface also includes a "View" dropdown menu and a "Print View" button.

Rejection message from Commander/AFMOA appears here.

Excellent Healthcare, Clinical Currency



AFMOA DQ Points of Contact

Group Email Box: afmoa.dq@us.af.mil



Important References

- **DODI 6015.1-M, DOD Glossary**
- **DODI 6010.13M, MEPRS Program for Fixed MTFs and DTFs**
- **DODI 6010.15M, Uniform Business Office**
- **[DODI 6040.40, Data Quality Program](#)**
- **DODI 6040.41, Medical Records Retention and Coding at MTF**
- **DODI, 6040.42, Medical Encounter and Coding at MTF**
- **DODI, 6040.43, Custody and Control of Medical Records**
- **AFI 41-102, AF MEPRS Program for Fixed MTFs and DTFs**
- **AFI 41-120, Resource Management Operations**
- **AFI 41-210, Patient Administration Functions**
- **DoD Professional Coding Guidelines**
- **AF Workload Standardization Guidelines**
- **EASIV Reference Guide**



Useful Web Sites

- **Data Quality**

- http://www.tricare.mil/ocfo/mcfs/dqmcp/management_control.cfm

- **BDQAS** - <https://bdqas.afms.mil>

- **UBU** - <http://www.tricare.mil/ocfo/bea/ubu/index.cfm>

- **UBO** - <http://www.tricare.mil/ocfo/mcfs/ubo/about.cfm>

- **MEPRS** - <http://meprs.info>

- **DMHRSi** - <https://dmhrsi.satx.disa.mil>

- <https://kx.afms.mil/kxweb/dotmil/kj.do?functionalArea=DMHRS1>

- **MEWACS** - <http://www.meprs.info/mol3/mol3.cfm>

- **DFAS** - <https://mypay.dfas.mil/mypay.aspx>

- **HIPAA** - <http://tricare.osd.mil/ocfo/mcfs/ubo/hipaa.cfm>

- **SAIC** - <http://www.chcs-dm.com/>



Useful Web Sites (cont)

- **Vector check -** <https://vc.afms.mil/afmoa/sga/sgar/sgardq/default.aspx>
- **NPPES -** <https://nppes.cms.hhs.gov>
- **HCIda -** <http://www.hcidealookup.org>
- **Knowledge Exchange -** <https://kx.afms.mil>



Take Aways

Excellent Healthcare, Clinical Currency



Air Force TMA DQ Course Break-Out Session Summary

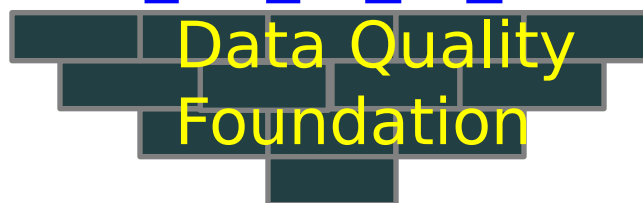
- **Organization**
- **MTF Engagement & Available Resources**
- **Why is DQ Important?**
- **HSI Requirements**
- **DQ Assurance Team**
- **CHCS Provider File**
- **Other DQ Efforts**
- **DQ Review List/Statement Completion**



Data Quality Program Office



MTF



Questions?